

QUESTIONNAIRE FOR METHYLENE CHLORIDE EXPOSURE

I. Demographic Information

1. Name
2. Date
3. Date of Birth
4. Age
5. Present occupation
6. Sex
7. Race (Check all that apply)
 - a. White ____
 - b. Black or African American ____
 - c. Asian ____
 - d. Hispanic or Latino ____
 - e. American Indian or Alaska Native ____
 - f. Native Hawaiian or
Other Pacific Islander ____

II. Occupational History

1. Have you ever worked with methylene chloride, dichloromethane, methylene dichloride, or CH_2Cl_2 (all are different names for the same chemical)? Please list which on the occupational history form if you have not already.
2. If you have worked in any of the following industries and have not listed them on the occupational history form, please do so.

Furniture stripping

Polyurethane foam manufacturing

Chemical manufacturing or formulation

Pharmaceutical manufacturing

Any industry in which you used solvents to clean and degrease equipment or parts

Construction, especially painting and refinishing

Aerosol manufacturing

Any industry in which you used aerosol adhesives

3. If you have not listed hobbies or household projects on the occupational history form, especially furniture refinishing, spray painting, or paint stripping, please do so.